



State Accreditation and Certification

Division of Animal Health

WISCONSIN DEPARTMENT OF AGRICULTURE, TRADE AND CONSUMER PROTECTION (DATCP)

DIVISION OF ANIMAL HEALTH

- ✓ Certification/ Accreditation of private veterinarians
- ✓ Disease monitoring, surveillance and response
- ✓ Animal disease traceability
- ✓ Licensing
- ✓ Inspections and Investigations
- ✓ Premises registration
- ✓ Emergency preparedness



WISCONSIN VETERINARY CERTIFICATION

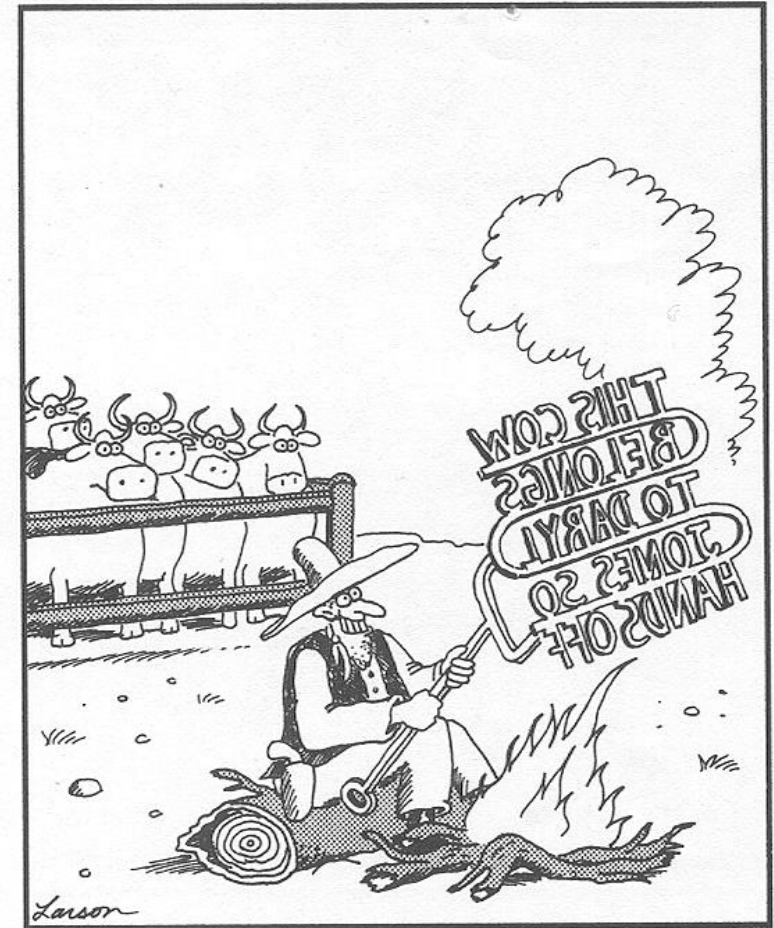
Covers areas that federal accreditation does not:

- Intrastate movement
- Brucellosis vaccination
- Caudal fold TB testing for cattle and bison
- TB and CWD testing for cervids
- Aquaculture health certificates
- Johne's vaccination and herd health plans



ANIMAL IDENTIFICATION

OFFICIAL OR NOT?



NUES Tags

- 9-characters (e.g. 35ABC1234)
 - Includes Orange Brucellosis vaccination tag
- 8-characters (e.g. 35AB1234)
 - Mostly seen for cervids
 - Not approved for cattle
- Starts with two-digit state code (35=WI)
- US Shield



USED IN:

- Cattle
- Swine
- Cervids
- Other
- NOT Sheep or Goats



Animal Identification Numbers

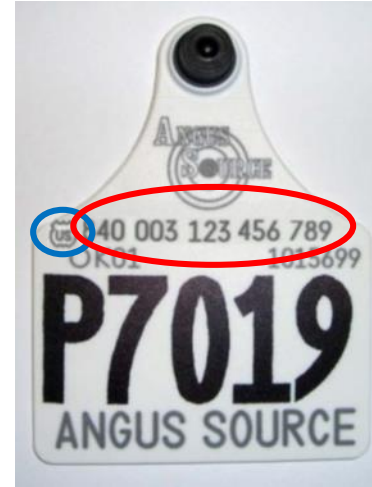
840 Tags

- 15-digit number
- Starts with “840” for US (“124” Canada)
- RFID or visual
- Should have US Shield (or CA – usually in a Maple Leaf for Canada)



USED IN:

- Cattle
- Swine
- Cervids
- Sheep/Goats
- Other



Animal Identification Numbers

Manufacturer Coded Tags

- 15 digit number
- Starts in “900” series
- RFID
- Will not have US Shield
- Only approved in animals tagged prior to March 11, 2015



Animal Identification Numbers

American ID

- 8 to 12-digit number
- Preceded by “USA”
- Visual only
- Will not have US Shield
- Only approved in animals tagged prior to March 11, 2015

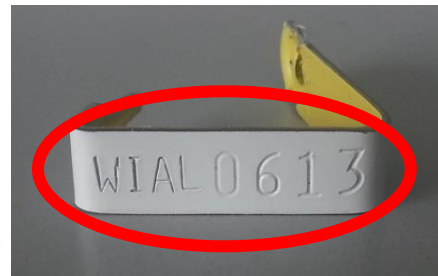


SCRAPIE TAGS – SHEEP AND GOATS



Serial Tags

- 8 digits
- Start with state's postal code



Flock Tags

- Flock number
- Individual animal number



PREMISES TAGS - SWINE



Premises Tags

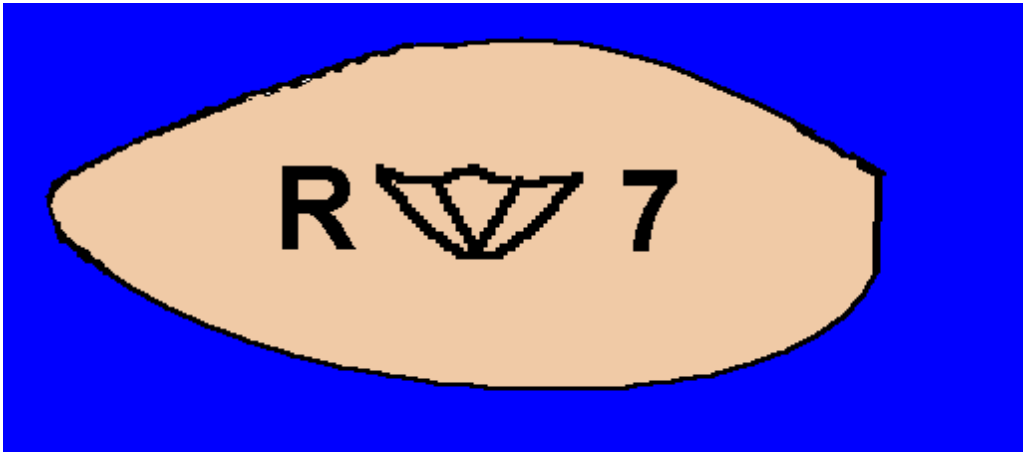
- Premises number
- Individual animal number
- For feeder pigs and slaughter swine can just have premises number



CATTLE REGISTRATION NUMBERS & TATTOOS

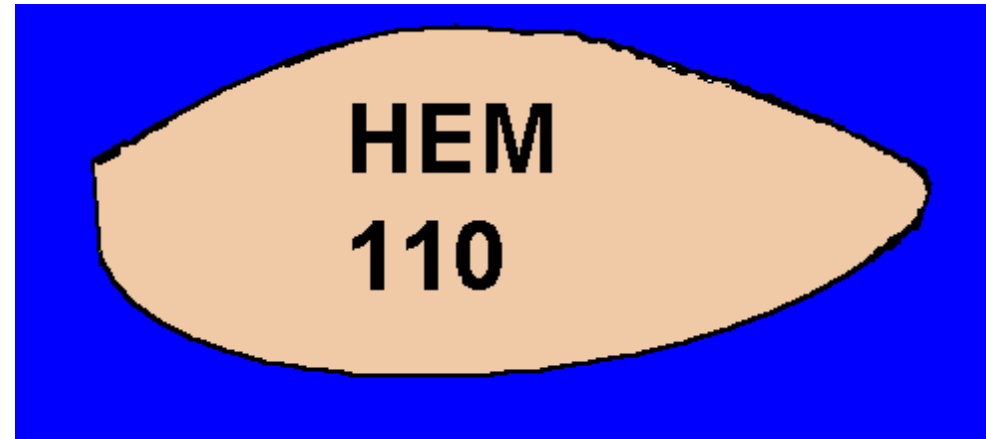
Vaccination Tattoo

- Right ear



Registration Tattoo

- Left ear



No longer accepted as official ID!



LEGIBLE TATTOOS



CHECK BOTH EARS

Legible Tattoos are accepted as official ID for:

- Swine
 - Registered in breed registry
- Sheep and Goats
 - Registered in breed registry –OR–
 - Flock ID + individual animal ID
 - Not for movement to markets or slaughter



DESCRIPTION – OFFICIAL IDENTIFICATION FOR HORSES

For Horses:

- Digital photographs
 - Incorporated into health certificates/Coggins paperwork
- A written description which includes all identifying characteristics present including:
 - Color
 - Leg/Face/Body markings
 - Brands
 - Tattoos
 - Scars
 - Hair whorls (cowlicks)
 - Blemishes



MICROCHIPS

- Conditions apply for most livestock species
- When conditions met approved in:
 - Horses
 - Cervids
 - Sheep/Goats
 - Other



ANIMAL IDENTIFICATION



- Accountable property
- Keep records
 - Date applied
 - ID numbers applied
 - Name/address where applied
 - Keep for 5 years
- Only apply one official ID tag



ANIMAL IDENTIFICATION

Accredited veterinarians are responsible for the materials (for example forms, identification, digital signatures) used for accredited veterinary work.



- 9 CFR 161.4(j)
- (j) An accredited veterinarian shall be responsible for the security and proper use of all official certificates, forms, records, and reports; tags, bands, or other identification devices; and approved digital signature capabilities used in his or her work as an accredited veterinarian and shall take reasonable care to prevent the misuse thereof. An accredited veterinarian shall immediately report to the Veterinary Official the loss, theft, or deliberate or accidental misuse of any such certificate, form, record, or report; tag, band, or other identification device; or approved digital signature capability.



ELECTRONIC RECORDS AND TAGS (RFID)

Electronic Records

- MIM
 - Brucellosis Vaccination
 - Tuberculosis testing
- Certificates of Veterinary Inspection



ANIMAL MOVEMENT

CERTIFICATE OF VETERINARY INSPECTION



CERTIFICATE OF VETERINARY INSPECTION (CVI)

- Important tool for disease protection
- Establish paper trail for monitoring shipments and more rapid tracing if necessary



ISSUING CVIS

- 9CFR161.4(a)
- (a) **An accredited veterinarian shall not issue a certificate, form, record or report which reflects the results of any inspection, test, vaccination or treatment performed by him or her with respect to any animal**, other than those in regular health maintenance programs, **unless he or she has personally inspected that animal within 10 days prior to issuance**. Inspections under this paragraph must be conducted in a location that allows the accredited veterinarian sufficient space to observe the animal in such a manner as to detect abnormalities related to areas such as, but not limited to, locomotion, body excretion, respiration, and skin conditions. An accredited veterinarian shall examine such an animal showing abnormalities, in order to determine whether or not there is clinical evidence compatible with the presence or absence of a communicable disease.



ISSUING CVIS

- 9CFR161.4(a)(2)
- (2) Following the third and subsequent inspections of a herd or flock in a regular health maintenance program, an accredited veterinarian shall not issue a certificate, form, record or report which reflects the results of any inspection, test, vaccination or treatment performed by him or her with respect to any animal in that program, unless he or she has personally inspected that animal within 30 days prior to issuance.



ISSUING CVIS

- 9CFR160.1
- *Regular health maintenance program.* An arrangement between an accredited veterinarian and a livestock producer whereby the veterinarian inspects every animal on the premises of the producer at least once every 30 days.



ISSUING CVIS

- 9CFR161.4(b)
- (b) **An accredited veterinarian shall not issue**, or allow to be used, **any certificate**, form, record or report, until, and **unless, it has been accurately and fully completed**, clearly identifying the animals to which it applies, and showing the dates and results of any inspection, test, vaccination, or treatment the accredited veterinarian has conducted, except as provided in paragraph (c) of this section, and the dates of issuance and expiration of the document. Certificates, forms, records, and reports **shall be valid for 30 days following the date of inspection** of the animal identified on the document, except that origin health certificates may be valid for a longer period of time as provided in §91.3(a) of this chapter. The accredited veterinarian must distribute copies of certificates, forms, records, and reports according to instructions issued to him or her by the Veterinary Official.



BASIC CVI REQUIREMENTS

- CHECK WITH STATE OF DESTINATION
- Origin and destination name/address
 - Phone number/mailling address and premises ID if available
 - The address should be ANIMAL LOCATION
- Number of animals
- Species
- Breed/sex/age
- Purpose of movement

- CHECK WITH STATE OF DESTINATION
- Official ID when required
- Test results when required
- Statements when required
- Vaccination information when required
- Permit numbers when required





**WISCONSIN INTERSTATE
CERTIFICATE OF VETERINARY INSPECTION**
(Also for Intrastate Cervid Movement)
Ch. ATPC 10, Wis. Admin. Code; Ch. 95, Wis. Stats.

SUBMIT ORIGINAL WITHIN 7 DAYS AFTER ISSUE TO:
Department of Agriculture, Trade and Consumer Protection
Division of Animal Health
P.O. Box 8911, Madison, WI 53708-8911
Phone: 608-224-4872 Fax: 608-224-4871

PLEASE PRINT LEGIBLY

OF SHIPMENT: <input checked="" type="checkbox"/> FARM <input type="checkbox"/> MARKET		SHIP DATE: <u>2-25-14</u>		IMPORT PERMIT NUMBER: <u>1234567</u>	
OWNER OR CONSIGNOR <u>John Doe</u>		CONSIGNEE OR DESTINATION <u>Richard Roe</u>		RECONSIGNEE AT PUBLIC SALE	
ORIGIN STREET ADDRESS <u>1234 County Rd A</u>		DESTINATION STREET ADDRESS <u>5678 County Rd Z</u>		RECONSIGNEE NAME	
ORIGIN CITY / STATE / ZIP <u>Sampletown, WI 54555</u>		DESTINATION CITY / STATE / ZIP <u>Anywhere, ND 58001</u>		RECONSIGNEE STREET ADDRESS	
OWNER MAILING ADDRESS (IF DIFFERENT THAN ABOVE)		DESTINATION MAILING ADDRESS (IF DIFFERENT THAN ABOVE)		CITY / STATE / ZIP	
PHONE NUMBER <u>(715) 923-0123</u>		PHONE NUMBER <u>(944) 777-7777</u>		PREMISES REGISTRATION NO.	
PREMISES REGISTRATION NO. <u>00XXV12</u>		PREMISES REGISTRATION NO.		VETERINARIAN SIGNATURE	
DISEASE		SPECIES		PHONE NO. () VET. LIC. NO.	
HERD STATUS		NUMBER IN SHIPMENT: <u>2</u>		(State veterinarian is responsible for meeting state of destination / other movement requirements)	
ACCREDITED TB HERD		PURPOSE OF MOVEMENT		HAULER INFORMATION (IF OTHER THAN CONSIGNEE)	
QUALIFIED TB HERD		<input checked="" type="checkbox"/> BREEDING <input type="checkbox"/> EXHIBITION/COMPETITION		HAULER NAME <u>ACME Livestock</u> HAULER LIC. NO. <u>000123</u>	
CERVIDAE CWD STATUS		<input type="checkbox"/> FEEDING <input type="checkbox"/> MEDICAL TREATMENT		HAULER ADDRESS <u>567 County Lane</u>	
BRUCELLOSIS/OTHER:		<input type="checkbox"/> SALE <input type="checkbox"/> SLAUGHTER		CITY / STATE / ZIP <u>Sampletown, WI 54555</u>	
		<input type="checkbox"/> TRAINING <input type="checkbox"/> OTHER		HAULER PHONE NO. <u>(715) 123-4567</u>	
OFFICIAL IDENTIFICATION		LABORATORY		BRUCELLOSIS	
SECONDARY ID		EIA		PRRS	
RFID NUMBER / USDA EARTAG		OTHER TEST			
1 <u>35X4Z1234</u>		BREED <u>HOL</u> SEX <u>F</u> AGE <u>1yr</u>		DATE BLED <u>1/1/14</u> TEST RESULT <u>neg</u>	
2 <u>35ABC5678</u>		BREED <u>HOL</u> SEX <u>F</u> AGE <u>1yr</u>		DATE BLED <u>1/1/14</u> TEST RESULT <u>neg</u>	
3					
4					
5					
6					
7					
8					
9					
10					
VETERINARIAN: I certify as a veterinarian, accredited and certified by the State of Wisconsin, that the described animal(s) have been inspected by me and that they are not showing any signs of infectious, contagious and/or communicable disease (except where noted). The vaccinations and results of tests are as indicated on this certificate. To the best of my knowledge, the animal(s) listed on this certificate meet the state of destination and Federal interstate requirements. No warranty is made or implied.					
OWNER / AGENT STATEMENT: I certify the animal(s) in this shipment are as listed on this certificate.		ACCREDITED / LIC VETERINARIAN SIGNATURE <u>Signature</u>		VETERINARIAN LIC. NO. <u>1000</u>	
OWNER / AGENT SIGNATURE <u>John Doe</u>		VETERINARIAN'S PRINTED NAME <u>John Doe</u>		FED. ACCRED. NO. <u>555555</u>	
		ADDRESS <u>Hometown Vet Clinic</u>		1234 Main St. Hometown, WI	
		PHONE NUMBER <u>(715) 333-3333</u>		DATE INSPECTED <u>2-24-14</u>	
		EMAIL ADDRESS		DATE CVI ISSUED <u>2-24-14</u>	

Cattle

The animals listed on this CVI are virgin heifers





WISCONSIN INTERSTATE EQUINE CERTIFICATE OF VETERINARY INSPECTION

Ch. ATCP 10, Wis. Admin. Code; Ch. 95, Wis. Stats



SUBMIT ORIGINAL WITHIN 7 DAYS AFTER ISSUE TO:
Department of Agriculture, Trade and Consumer Protection
Division of Animal Health
P.O. Box 8911, Madison, WI 53708-8911
Phone: 608-224-4872 Fax: 608-224-4871

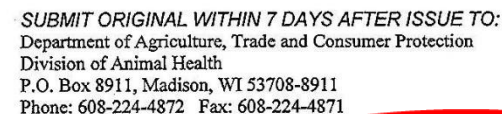
ORIGIN OF SHIPMENT		<input type="checkbox"/> Dealer <input type="checkbox"/> Market / Name:		IMPORT PERMIT NUMBER: 00000-AAA1Z	
Consignor Jane Doe		Consignee or Destination Rachel Roe Stable		RECONSIGNEE AT PUBLIC SALE	
Origin Street Address 1234 County Rd. A		Destination Street Address 5678 County Rd Z		Reconsignee Name	
Origin City / State / Zip Sampletown, WI 54555		Destination City / State / Zip Anyplace, IL 44444		Reconsignee Street Address	
Owner (mailing address / City / State / Zip (if different than above)) 123 Main St. Anyplace, IL 44444		Destination Mailing Address / City / State / Zip (if different than above)		City / State / Zip	
Phone Number (715) 123-0123		Premises Registration Number 00XX41Z		Premises Registration Number	
Signature (Veterinarian)					
Description (indicate color and markings)		Breed	Sex	Age	EIA TEST WVDL-Barron <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, include name / address of laboratory test location below Lab Accession No.
1 Wimpy's Best Friend		H	F	8	Acc # 0000000
2 Sorrel, star, stripe, snip					Marshfield Labs
3 Prophets thumb L jugular furrow					1000 N. Oak Ave
4 Whorls L & R upper crest					Marshfield, WI 53555
5 LF Pastern, RF Stocking					
6 LH & RH socks					
7					
8					
9					
10					
<p>VETERINARIAN: I certify as a veterinarian, accredited and certified by the State of Wisconsin, that the described animal(s) have been inspected by me and that they are not showing any signs of infectious, contagious and/or communicable disease (except where noted). The vaccinations and results of tests are indicated on this certificate. To the best of my knowledge, the animal(s) listed on this certificate meet the state of destination and Interstate requirements. No warranty is made or implied.</p>					
OWNER / AGENT STATEMENT: I certify the animal(s) in this shipment are as listed on this certificate.		Accredited / Licensed Veterinarian Signature [Signature]		Veterinarian's License Number 1001-WI	
Owner / Agent Signature Jane Doe		Veterinarian's Printed Name Jane Doe Veterinarian		Phone Number (715) 222-2222	
		Address 1234 Main St. Hometown, WI 53555		Date Inspected 2-24-14	
				Date Certificate Issued 2-24-14	

Personal information you provide may be used for purposes other than that for which it was originally collected - sec. 15.04(1)(m), Wis. Stats.

FORM DISTRIBUTION: WHITE (WI State Veterinarian), CANARY (State Veterinarian of destination), PINK (accompany shipment), GOLDENROD (retained by issuing veterinarian)

Equine





Cervids




**WISCONSIN INTERSTATE SMALL ANIMAL
CERTIFICATE OF VETERINARY INSPECTION**

Ch. ATPC 10, Wis. Admin. Code; Ch. 95, Wis. Stats.

THIS FORM IS NOT FOR
INTERNATIONAL MOVEMENT

SUBMIT ORIGINAL WITHIN 7 DAYS AFTER ISSUE TO:
Department of Agriculture, Trade and Consumer Protection
Division of Animal Health
P.O. Box 8911, Madison, WI 53708-8911
Phone: 608-224-4872 Fax: 608-224-4871

TYPE OF ANIMAL SHIPPED				PERMIT NUMBER (If applicable)				SHIPMENT			
<input type="checkbox"/> Dog <input type="checkbox"/> Cat <input type="checkbox"/> Non-human Primate <input type="checkbox"/> Other: _____								<input checked="" type="checkbox"/> Returning to WI <input type="checkbox"/> Not returning to WI			
Owner or Consignor				Consignee or Destination				Number of Animals in Shipment: _____			
Origin Street Address				Destination Street Address				Shipping date: _____			
Origin City / State / Zip				Destination City / State / Zip							
Owner Mailing Address / City / State / Zip (if different than above)				Destination Mailing Address / City / State / Zip (if different than above)							
Phone Number () _____				Phone Number () _____				<input type="checkbox"/> Animals are traveling with owner on vacation			
Breed	Individual Identification (Name, Description of Markings, Microchip, etc.)	Age	Rabies Vaccination Date	Rabies Vaccination Exp. Date	Product & Vaccine Producer	Serial Number	Rabies Tag Number	Other Vaccinations	Date Vaccinated	Product & Vaccine Producer	
1											
2											
3											
4											
5											
6											
7											

VETERINARIAN: I certify as a veterinarian, accredited and certified by the State of Wisconsin, that the described animal(s) have been inspected by me and that they are not showing any signs of infectious, contagious and communicable disease (except where noted). The vaccinations and results of tests are as indicated on this certificate. To the best of my knowledge, the animal(s) listed on this certificate meet the state of destination and Federal interstate requirements. No warranty is made or implied.

OWNER / AGENT SIGNATURE	VETERINARIAN'S PRINTED NAME	NAT. ACCRED. NO. (NAN)	PHONE NUMBER () _____	EMAIL ADDRESS _____	DATE CVI ISSUED _____

Personal information you provide on this form is confidential and for which it was originally collected - sec. 15.04(1)(m), Wis. Stats. Equal Opportunity Employer

FORM DISTRIBUTION: WHITE (WI State Veterinarian), CANARY (State Veterinarian of destination), PINK (accompany shipment), GOLDENROD (retained by issuing veterinarian)

Small Animals



BE CAUTIOUS WITH VACCINATION AND TESTING INFORMATION!

- ✓ Contact destination state for their import requirements.
 - ✓ Do not assume that if a pet is current on their rabies vaccination for Wisconsin that it will meet other states' requirements.
- ✓ If no rabies immunization data because too young, write:
“Too young for rabies vaccination” and include animal's age



BE CAUTIOUS WITH VACCINATION AND TESTING INFORMATION!

- ✓ When using test or vaccine information provided by another veterinarian:
 - ✓ Do not accept owner's word alone.
 - ✓ Demand copies of test report/valid rabies certificate issued by veterinarian who tested/vaccinated animal
 - ✓ Add the other veterinarian's name and date and place of test/vaccination on CVI.
 - ✓ Keep copies of these documents in your records with the CVI



USING RESULTS FROM ANOTHER VETERINARIAN 9CFR161.4(C)

(c) An accredited veterinarian shall not issue any certificate, form, record, or report which reflects the results of any inspection, test, vaccination, or treatment performed by another accredited veterinarian, unless:

(1) The signing accredited veterinarian has exercised reasonable care, that is, a standard of care that a reasonably prudent person would use under the circumstances in the course of performing professional duties, to determine that the certificate, form, or report is accurate;

(2) The certificate, form, or report indicates that the inspection, test, vaccination, or treatment was performed by the other accredited veterinarian; identifies the other accredited veterinarian by name; and includes the date and the place where such inspection, test, or vaccination was performed; and,

(3) For a certificate, form, or report indicating results of a laboratory test, the signing accredited veterinarian shall keep a copy of the certificate, form, or report and shall attach to it either a copy of the test results issued by the laboratory, or a written record (including date and participants' names) of a conversation between the signing accredited veterinarian and the laboratory confirming the test results.



COMMON CVI MISTAKES

Illegibility

- May result in animal becoming “lost luggage”

No signature

- Signature stamps are unacceptable

No date

- Need to validate time of exam

No consignee information

- Need name and address to be sure health requirements are met and prevent “lost luggage”
- “Traveling with owner”

Insufficient animal identification

- Need individual ID
- Name, age, breed, color and markings, sex, spayed/neutered
- Animals not amenable to tagging, banding, tattooing, etc. (reptiles) require complete description

Outdated

- Valid for 30 days from date of inspection
- Commercial airlines require certificates be issued by veterinarian who examined animal within 10 days of transport



#1

The most important thing to remember is that the certificate of veterinary inspection (CVI) **MUST BE COMPLETED PROPERLY** in order to comply with state and federal rules. Failure to comply may result in extra costs incurred at the destination and disciplinary action for you as the veterinarian, your clients, and/or the destination. Call 608-224-4874 if you need assistance.

Federal regulations state that you have 7 DAYS TO SUBMIT COPIES OF THE CVI to our department AND to the state of destination.

[illegible]

A VALID PERMIT NUMBER may be required here. Call the state of destination for the requirements. Contact information is on the back of the CVI and at datcp.wi.gov/animals/animal_movement.

#4 If required by state or federal law, animals shipped interstate must have **OFFICIAL INDIVIDUAL IDENTIFICATION**. Contact the state of destination regarding ID requirements. If you are unsure which type of ID is correct, please consult our Official Identification Reference Deck for assistance found at datcp.wi.gov.

#8
States may require specific TESTING OR QUARANTINE STATEMENTS. Contact the state of destination. Make sure the correct testing has been done within the required time frame, and that all information required by the destination state is included on the CVL.

#5 **DISTRIBUTE FORMS PROPERLY** to ensure timely processing of your paperwork.

According to federal rule, in general CVIs **MUST BE ISSUED WITHIN 10 DAYS OF THE EXAM** date and are current for 30 days from the exam date.



Resource: <https://datcp.wi.gov/Documents/CVITopMistakes.pdf>



INTRASTATE MOVEMENT

Cervid Requirements

- CWD monitoring program
- TB testing
- Certificate of Veterinary Inspection

Goat and Sheep Identification

Aquaculture Requirements



Equine Requirements

- EIA tests

Swine requirements

- PRRS/ SECD testing, herd plans



RABIES CONTROL

DR. YVONNE BELLAY, HUMANE PROGRAMS VETERINARIAN



STATUTORY AUTHORITY

Wisconsin Statute Chapter 95—Animal Health

- S.95.21 Rabies Control Program



DEFINITIONS

Quarantine

- Means the *restriction of the activities* of well persons or animals who have been exposed to a case of communicable disease during its period of communicability **to prevent disease transmission** during the incubation period if infection should occur

Isolation facility

- Means a humane society shelter, veterinary hospital, municipal pound or other place specified by an officer which is equipped with a pen or cage which isolates the animal from contact with other animals

Officer

- Means a peace officer, local health officer, as defined in s.250.01(5), humane officer, warden, an employee designated by the department or other person designated by the governing body of the county, city, village or town



DEFINITIONS

Owner

- Includes a person who owns, harbors, keeps or controls an animal

Veterinarian

- Has the meaning designated under s.89.02(7)

Veterinary Technician

- Has the meaning designated under s.89.02(12)
- Person duly certified by the examining board to work under the direct supervision of a licensed veterinarian



RABIES VACCINATION

Required for dogs

- Municipalities may require for cats

Administered by veterinarian or
veterinary technician

No later than 5 months of age

- Coincides with licensing requirement

Minimum age determined by vaccine
licensing



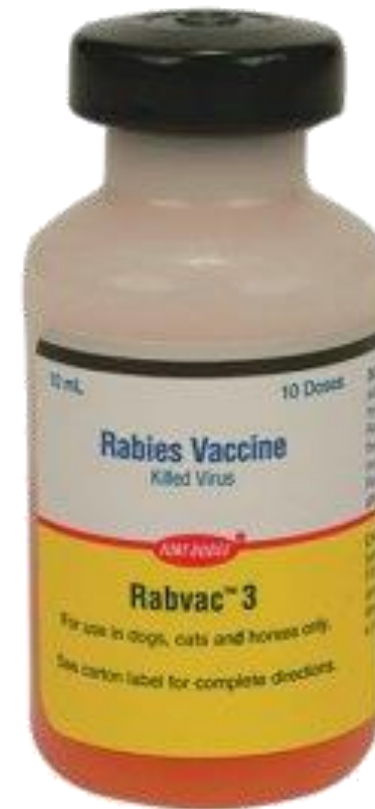
RABIES VACCINATION

Revaccinate within 1 year of initial vaccination

- Regardless of age of initial vaccination or vaccine used

Subsequent vaccinations per manufacturer recommendations

- 1 or 3 years
- No 2-year products



RABIES RE-VACCINATION

If a previously vaccinated animal is overdue for a booster it should be revaccinated with a single dose of vaccine

Immediately following the booster, the animal is considered currently vaccinated

- Rapid, strong anamnestic response

Current for duration of vaccine approval

No need to “start over”



Currently, a non-veterinarian may buy rabies vaccine and administer the vaccine. However, the vaccination *is not valid or recognized* for purposes of rabies control or licensing.



QUARANTINE FOR DOG OR CAT (FERRET)

Officer shall order, not veterinarian or humane society

Reason to believe animal:

- Bit a person
- Infected with rabies or
- In contact with a rabid animal

Owner shall deliver within 24 hours of original order



SACRIFICING AN ANIMAL

Dog, Cat, or Ferret

Cannot be captured

- Last resort or
- Owner agrees

Owner violates quarantine

Other Animals

Reason to believe that animal

- Bit a person or
- Is infected with rabies

Note: there is no provision for quarantine

Livestock cases dealt with on a case-by-case basis



BITE REPORTING

- ✓ State law does not mandate
- ✓ Reporting may be required by local ordinance
- ✓ Failure to report may make case management difficult



QUARANTINE: HUMAN EXPOSURE

Under strict isolation

Owner premises if currently immunized

- Valid certificate of rabies vaccination
 - ▣ Not because the owner says so

Isolation facility if not currently immunized

At least 10 days

- May be extended if clinical signs warrant

Veterinary supervision

- 3 exams by veterinarian
- Day 1, day 10, intervening day
 - ▣ Problems when not presented as ordered
- No vaccinations during quarantine

Veterinarian certifies animal shows no signs of rabies

Quarantine released by officer who issued



10-DAY QUARANTINE

No method to diagnose ante-mortem

Applies only to dogs, cats, and ferrets

- Viral shedding period for dogs, cats, and ferrets is known

Concern about whether biting animal was shedding rabies virus in saliva at time of bite

Observation of normal animal to determine changes in health or behavior

Allows sufficient time to determine health of animal

Once virus enters brain, animal will show signs and die within few days

If animal is healthy after 10 days, it was not shedding virus at time of bite

Provides safe “window” in which to begin PEP if necessary

Has withstood test of time



10-DAY QUARANTINE

- ✓ Puppies, kittens, kits
- ✓ May bite before old enough to vaccinate
- ✓ Quarantine provisions apply
- ✓ Quarantine provisions due to public health concerns--not punitive
- ✓ Positive cases have resulted in multiple human exposures



10-DAY QUARANTINE



Must take precautions when quarantining young

- Not fully vaccinated
- Socialization issues



QUARANTINE: ANIMAL EXPOSURE

- ✓ May be kept on owner premises regardless of vaccination status, if quarantine provisions are met
- ✓ Must be leased or confined

Currently immunized

- 60 days
- Revaccinate immediately after exposure

Not currently immunized

- Recommend immediate euthanasia, but if owner refuses:
 - ▣ 180 days
 - ▣ Vaccinate between 155-165 days of quarantine
 - ▣ Current recommendation is to vaccinate immediately



180-DAY QUARANTINE

- ✓ Exposed animal is not protected by immunization
- ✓ Exposed, unprotected animal presents a significant public health risk
- ✓ Quarantine requirements strict due to risk of exposure to people and other animals
- ✓ Incubation period for animals may be as long as 6 months in animals
- ✓ Euthanasia should be first recommendation
- ✓ No acceptable protocol for PEP in animals



60-DAY QUARANTINE

- ✓ Owner can provide proof animal is currently immunized
 - ▣ Certificate of rabies vaccination
- ✓ Rabies vaccine provides excellent protection; however, no vaccine is 100% effective
- ✓ Rabies is always fatal once signs are evident
- ✓ Animal is boosted immediately after exposure to provide “immune insurance”
- ✓ Quarantine requirements less strict due to vaccination status



ALGORITHM FOR RABIES EXPOSURE



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Search our website

I'm looking for...



Did an actual exposure occur?

Rabies is transmitted only when the virus is introduced into bite wounds or open skin wounds or onto mucous membranes. Two general categories of exposure are recognized:

1. Bite: All bites that penetrate or abrade the epidermis, regardless of anatomic location, constitute an exposure.
2. Non-Bite: The contamination of open wounds, abrasions, mucous membranes, or scratches with saliva or other potentially infectious material (neural tissue, cerebrospinal fluid, salivary gland tissue) constitutes an exposure. Because the rabies virus is inactivated by desiccation and ultraviolet irradiation, in general, if the material containing the virus is dry, the virus can be considered non-infectious. It is rare for non-bite exposures to result in rabies. Clinicians are urged to consult with public health officials before initiating post-exposure prophylaxis for non-bite exposures.

<http://www.dhs.wisconsin.gov/communicable/Rabies/RabiesAlgorithm/AlgorithmCategories.htm>



ANIMALS EXHIBITING SYMPTOMS

- ✓ Veterinarian determines
- ✓ Veterinarian notifies owner and officer that issued quarantine
- ✓ Kill animal humanely
- ✓ Avoid damage to head
- ✓ Submit to State Laboratory of Hygiene



TISSUE SAMPLING

Tissue sampling for diagnosis

- Send the **full** brain

Protect head when killing animal

- Don't smash bats
- Don't shoot other animals in head

Inadequate sample

Equivocal result



Unnecessarily?



DOCUMENTATION PROBLEMS

- ✓ Multiple specimens in the same shipper with no indication on requisition
- ✓ Multiple unassociated specimens in the same shipper
- ✓ Submitter not indicated
- ✓ Physician not indicated



MODE OF SHIPMENT

Hand delivery

- Ideal
- Distance consideration

Priority mail

UPS

Guaranteed overnight delivery

Bus



INFORMATION RESOURCES



IMPORTANT CONTACT INFORMATION

Interstate

DATCP Division of Animal Health

AnimalMovement.datcp.wi.gov

(608) 224-4872

DATCP Website

datcp.wi.gov

*Select Animal Health under the
Programs/Services drop-down menu*

International

USDA-APHIS-VS

<http://www.aphis.usda.gov/regulations/vs/liregs/animals/>

(608) 662-0630

USDA APHIS Website

www.aphis.usda.gov



CERTIFICATION



APPLYING FOR CERTIFICATION

Complete *state-specific* orientation, which you've now done *for Wisconsin*

- *If you're going to practice in another state, you need to contact that state for further information.*

Graduate

Get your license in the state where you'll be practicing

Submit a VS Form I-36A to the VS office in the state where you'll be practicing.

- Available at the office or at www.aphis.usda.gov/nvap/

You'll also need to complete online training at www.aphis.usda.gov/nvap/

You will be notified by mail when you have been accredited and authorized to do accreditation work. Until then, you cannot perform any accreditation duties.

If you have questions: **Valencia Watts, USDA-APHIS-VS, (517) 337-4701 or valencia.t.watts@aphis.usda.gov**

http://www.aphis.usda.gov/animal_health/vet_accreditation/index.shtml



RENEWING ACCREDITATION

You will need to complete online training within three years to renew your accreditation.

- http://www.aphis.usda.gov/animal_health/vet_accreditation/renew.shtml
- Or Google NVAP
- Do it sooner rather than later – it helps pull all this together

If you start practicing in one state and move to another, you will need to get authorization in that state.



AFTER YOU LEAVE TODAY

You'll need to complete the TB certification seminar to do TB testing on cattle, bison and/or cervids.

And if you intend to do CWD tests, you'll need to work with your district veterinarian to get certified.

*And remember, when in doubt, **CALL!***





QUESTIONS?

Thank You!



Division of Animal Health

(608) 224-5012 - DATCPAnimalImports@wisconsin.gov - <https://datcp.wi.gov>

WISCONSIN DEPARTMENT OF AGRICULTURE, TRADE AND CONSUMER PROTECTION (DATCP)

November 2020